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SERIAL NUMBER 10/784,347	FILING OR 371(c) DATE 02/23/2004 RULE	CLASS 435	GROUP ART UNIT 1653	ATTORNEY DOCKET NO. 536-3A	
APPLICANTS Lawrence Restaino, Elburn, IL; ** CONTINUING DATA ***** This application is a CIP of 09/885,204 06/20/2001 ABN ** FOREIGN APPLICATIONS ***** IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 05/15/2004					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		STATE OR COUNTRY IL	SHEETS DRAWING 0	TOTAL CLAIMS 12	INDEPENDENT CLAIMS 2
ADDRESS MARSHALL A. BURMEISTER P.O. BOX 765 WILLIAMS BAY ,WI 53191					
TITLE PLATING MEDIA FOR THE IDENTIFICATION OF SALMONELLA					
FILING FEE RECEIVED 728	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		